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PTO/SB/82 (05/0-3)
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Application Number	09/785,772
Filing Date	February 16, 2001
First Named Inventor	Robert C. Ledzius
Group Art Unit	2131
Examiner Name	Unknown
Attorney Docket Number	QUI200/4-002

I hereby revoke all previous powers of attorney or authorizations of agent given in the above-identified application:

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☒ Please change the correspondence address for the above-identified application to:

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<input checked="" type="checkbox"/> Firm or Individual Name	Sally Draper				
Address	Quickflex, Inc.				
Address	8401 N. New Braunfels, Suite 324				
City	San Antonio				
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I am the:

☐ Applicant/Inventor

☒ Assignee of record of the entire interest. See 37 CFR 3.71
Certificate under 37CFR 3.73(b) is enclosed (Form PTO/SB/96)

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SIGNATURE of Applicant or Assignee of Record

Name Quickflex, Inc.

Signature

Sally Draper, President & CEO

Date

January 6, 2004

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of 1 forms are submitted.

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